FEC

STATEMENT OF **ORGANIZATION**

RECEIVED. SECRETARY OF THE SENATE

FORW 1			11 AUG	Office Use Only
NAME OF COMMITTEE (in fi	uil) (Check if n		e 12FE4M5	
Elizabeth fo	r MA Explorato	ry Committee		
ADDRESS (number and	street) P.O. Box	960405		
(Check if addition is changed)	Boston		MA Q	2196
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL	ADDRESS (Please provide or			
(Check if a is changed	PLGroup	@perkinscole.com	n	
COMMITTEE'S WEB P	AGE'ADDRESS(A)⊭(P)L}Y\A7 €	lizabethforma.c	om	
	1,,,,,,			
(Check if ad is changed)			_ 1 _ 1 _ 1 _ 1 _ 1 _ 1	
2. DATE 08	′ 17°′ 2011 `	:		
3. FEC IDENTIFICA	TION NUMBER	С		
4. IS THIS STATEME	ENT NEW (N)	OR AMENDED	A)	
I certify that I have exa	umined this Statement and to	the best of my knowledge and be	elief it is true, correct	and complete.
Type or Print Name of	Treasurer Bruce H.	. Mann		
Signature of Treasurer			_ Date 💍 🖔	1664011
NOTE: Submission of fall		ormation may subject the person sig		the penalties of 2 U.S.C. §437g.
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)

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